



City of Yukon
Utility Billing Department
500 W Main
PO Box 850500
Yukon, OK 73085
405-354-1895
fax 405-350-8909
customerservice@cityofyukonok.gov

REQUEST TO TURN OFF SERVICE

Two forms of identification are required; at least one must be a photo I.D.

Name on Account _____

Service Address _____

Please turn off my service on _____

Forwarding address _____

Phone Numbers _____

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*If you cannot submit this in person, please have this form notarized and send to us along with very clear, legible copies of two forms of identification, one of which must be a photo I.D. We will not turn off your service until all documents are received and are legible.*

Notary Stamp or Seal:

\_\_\_\_\_  
Notary Public

County of \_\_\_\_\_ State of \_\_\_\_\_

Signed before me this \_\_\_\_\_ date of \_\_\_\_\_

My commission expires \_\_\_\_\_